

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000002517

FILED
Jul 25, 2006
Secretary of State

Entity Name: MAGNA PHARMACEUTICALS, INC.

Current Principal Place of Business:

6316 OLD LAGRANGE ROAD
CRESTWOOD, KY 40014

New Principal Place of Business:

6316 OLD LAGRANGE ROAD
CRESTWOOD, KY 40014 US

Current Mailing Address:

11802 BRINLEY AVE.
SUITE 201
LOUISVILLE, KY 40243

New Mailing Address:

11802 BRINLEY AVE.
SUITE 201
LOUISVILLE, KY 40243 US

FEI Number: 61-1185441

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LESSER, WARREN P
Address: 11802 BRINLEY AVE., SUITE 201
City-St-Zip: LOUISVILLE, KY 40243

Title: S () Delete
Name: FOLEY, IRVIN ESQ.
Address: 11802 BRINLEY AVE., SUITE 201
City-St-Zip: LOUISVILLE, KY 40243

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LESSER, WARREN P
Address: 11802 BRINLEY AVE., SUITE 201
City-St-Zip: LOUISVILLE, KY 40243 US

Title: S (X) Change () Addition
Name: FOLEY, IRVIN ESQ.
Address: 11802 BRINLEY AVE., SUITE 201
City-St-Zip: LOUISVILLE, KY 40243 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WARREN LESSER

P

07/25/2006

Electronic Signature of Signing Officer or Director

_____ Date